

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>	jb		07-13-01
<b>O.I.P.E. CLASSIFIER</b>	2		7-20-01
<b>FORMALITY REVIEW</b>	82	932	08-27-01
<b>RESPONSE FORMALITY REVIEW</b>	SL	1021	01/11/02

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Date
Final	
Original	
1	✓ 6/9/03
2	✓ 6/9/03
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27	
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29	✓ ✓
30	✓ ✓ ✓
31	✓ ✓ ✓
32	✓
33	✓ ✓ ✓
34	N N
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36	
37	
38	✓
39	÷ ✓ ✓
40	✓ ✓
41	
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43	
44	✓
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49	
50	✓ ✓

Claim	Date
Final	
Original	
51	✓ ✓
52	✓ ✓
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Claim	Date
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Original	
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If more than 150 claims or 10 actions  
staple additional sheet here

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1/17/01  
JC 41932  
d/14/01